

Form **4** **Wisconsin Corporation**
Franchise or Income Tax Return

2005

For 2005 or taxable year beginning 2 0 0 and ending 2 0 0
M M D D Y Y Y Y M M D D Y Y Y Y

Complete form using BLACK INK

Due Date: 15th day of 3rd month following close of taxable year.

Corporation Name			A Federal Employer ID Number
Number and Street			B Business Activity (NAICS) Code
City	State	ZIP Code	C State and Year of Incorporation

D Check box if applicable and attach explanation:

- 1 ☐ First return - new corporation or entering Wisconsin 3 ☐ Short period - change in accounting period
2 ☐ Final return - corporation dissolved or withdrew 4 ☐ Short period - stock purchase or sale



Check box if applicable and see instructions:

- E ☐ If this is an amended return, attach an explanation of the changes.
F ☐ If you have an extension of time to file, enter the extended due date 2 0 0
M M D D Y Y Y Y
G ☐ If no business was transacted in Wisconsin during the taxable year, attach a complete copy of your federal return.
H ☐ If you filed a federal consolidated return, enter Parent's federal EIN _____

PAPER CLIP check or money order here

1 Federal taxable income from Form 1120, line 28, or Form 1120-A, line 24	1	.00
2 Additions (from Schedule V, line 19, or Form 4C, line 12, column 3)	2	.00
3 Add lines 1 and 2	3	.00
4 Subtractions (from Schedule W, line 12, or Form 4C, line 15, column 3)	4	.00
5 Subtract line 4 from line 3. This is net income (loss) before apportionment and net business loss offset	5	.00
6 Total company net nonapportionable income (loss) (from Form 4B, line 5, column b)	6	.00
7 Subtract line 6 from line 5. This is apportionable income (loss)	7	.00
8 Wisconsin apportionment percentage (from Form 4B, line 39, or Form 4B-1; (carry to 4 places to the right of the decimal point). If the apportionment percentage is from Form 4B-1, check box <input type="checkbox"/>	8	_____ %
9 Multiply line 7 by line 8	9	.00
10 Wisconsin net nonapportionable income (loss) (from Form 4B, line 5, column a)	10	.00
11 Combine lines 9 and 10. This is Wisconsin net income (loss) before net business loss offset	11	.00
12 Wisconsin net business loss carryforward (from Form 4BL, line 30) but not more than line 11	12	.00
13 Subtract line 12 from line 11. This is Wisconsin net income (loss)	13	.00
14 Enter 7.9% (0.079) of Wisconsin net income on line 13. This is gross tax	14	.00
15 Nonrefundable credits (from Schedule C1, line 18)	15	.00
16 Subtract line 15 from line 14. If line 15 is more than line 14, enter zero (0). This is net tax	16	.00
17 Recycling surcharge (for corporations whose gross receipts from all activities are \$4 million or more, enter at least \$25 but not more than \$9,800 - see instructions)	17	.00
18 Endangered resources donation (decreases refund or increases amount owed)	18	.00
19 Veterans trust fund donation (decreases refund or increases amount owed)	19	.00
20 Add lines 16 through 19	20	.00
21 Estimated tax payments less refund from Form 4466W. If this is an amended return, see instructions	21	.00
22 Wisconsin tax withheld from pass-through entities	22	.00
23 Refundable credits (from Schedule C2, line 3)	23	.00
24 Add lines 21 through 23	24	.00

25	Interest, penalty, and late fee due (from Form 4U, line 17 or 26). If you annualized income on Form 4U, check box <input type="checkbox"/>	25	_____	.00
26	Tax due. If the total of lines 20 and 25 is larger than line 24, enter amount owed	26	_____	.00
27	Overpayment. If line 24 is larger than the total of lines 20 and 25, enter amount overpaid	27	_____	.00
28	Enter amount of line 27 you want credited on 2006 estimated tax	28	_____	.00
29	Subtract line 28 from line 27. This is your refund	29	_____	.00
30	Enter total company gross receipts from all activities (see instructions)	30	_____	.00
31	Enter total company assets from federal Form 1120 or 1120-A, item D	31	_____	.00
32	a Property _____ % b Wisconsin property (from Form 4B, line 16)	32b	_____	.00
	c Total company property (from Form 4B, line 16)	32c	_____	.00
33	a Payroll _____ % b Wisconsin payroll (from Form 4B, line 22)	33b	_____	.00
	c Total company payroll (from Form 4B, line 22)	33c	_____	.00
34	a Sales _____ % b Wisconsin sales (from Form 4B, line 35)	34b	_____	.00
	c Total company sales (from Form 4B, line 35)	34c	_____	.00

Schedule C1 - Nonrefundable Credits (See instructions, page 12)

1	Manufacturer's sales tax credit (Sch. Z, line 13)	1	_____	.00
2	Dairy investment credit (Sch. DI, line 9)	2	_____	.00
3	Research expense credit (Sch. R, line 30)	3	_____	.00
4	Development zones research credit carryforward	4	_____	.00
5	Research facilities credit (Sch. R, line 34)	5	_____	.00
6	Community development finance credit	6	_____	.00
7	Development zones jobs credit carryforward	7	_____	.00
8	Development zones sales tax credit carryforward	8	_____	.00
9	Development zones investment credit (Sch. DC, line 15)	9	_____	.00
10	Development zones location credit carryforward	10	_____	.00
11	Development zone capital investment credit (Sch. DC, line 23)	11	_____	.00
12	Development zones day care credit carryforward	12	_____	.00
13	Development zones environmental remediation credit carryforward	13	_____	.00
14	Development zones credit (Sch. DC, line 7)	14	_____	.00
15	Technology zone credit (Sch. TC, line 8)	15	_____	.00
16	Early stage seed investment credit (Sch. VC, line 8)	16	_____	.00
17	Supplement to federal historic credit (Sch. HR, line 7)	17	_____	.00
18	Add lines 1 through 17 (enter on page 1, line 15)	18	_____	.00

Schedule C2 - Refundable Credits (See instructions, page 15)

1	Farmland preservation credit (Sch. FC, line 18)	1	_____	.00
2	Farmland tax relief credit (Sch. FT, line 6)	2	_____	.00
3	Add lines 1 and 2 (enter on page 1, line 23)	3	_____	.00



Additional Information Required

- 1 Person to contact concerning this return: _____ Phone #: _____ Fax #: _____
- 2 City and state where books and records are located for audit purposes: _____
- 3 Attach a list of your solely owned limited liability companies. Did you include the incomes of these entities in this return?
☐ Yes ☐ No
- 4 Related party information: Enter the amount of sales \$ _____, purchases \$ _____, management fees paid \$ _____, interest expense \$ _____, royalties paid \$ _____, and interest income received \$ _____ and provide details of the computations.
- 5 Did you purchase any taxable tangible personal property or taxable services for storage, use, or consumption in Wisconsin without payment of a state sales or use tax? ☐ Yes ☐ No If yes, you owe Wisconsin use tax. See instructions, page 6, for how to report use tax.
- 6 Did any adjustments made by the Internal Revenue Service to your income for prior years become finalized during this year? ☐ Yes ☐ No If yes, see General Instructions, page 5, and indicate years adjusted: _____
- 7 Enter the number of Wisconsin business locations at the end of the year: _____
- 8 List the locations of your Wisconsin operations: _____
- 9 Are any manufacturing facilities located in Wisconsin? ☐ Yes ☐ No

Under penalties of law, I declare that this return and all attachments are true, correct, and complete to the best of my knowledge and belief.

Signature of Officer ▶	Title	Date
Preparer's Signature ▶	Preparer's Federal Employer ID Number	Date

Attach a copy of your federal return, even if no Wisconsin activity.



Make your check payable to and mail your return to: Wisconsin Department of Revenue
 PO Box 8908
 Madison, WI 53708-8908